AMENDMENTS TO THE SPECIFICATION

Please amend the middle paragraph of page 2 as follows:

Page 2, middle paragraph:

- One drawback to the prior art is their inability to make a variety of lesions.

There are typically two types of lesions which are generated by ablation catheters.

[one] One type of lesion is a focal lesion where the RF wave is concentrated at a point.

Typically, the prior art is limited to making focal lesions. A tip electrode carried on the distal tip of an ablation catheter is preferably used for making focal lesions. However, there are a variety of procedures in which linear lesions are preferred, requiring that the RF energy be delivered along a line. There are prior art ablation catheters which are capable of creating linear lesions; however, these prior art ablation catheters are not particularly suited for making focal lesions. A linear electrode is preferably utilized for making linear lesions. Although tip electrodes can also be used utilized for making linear lesions, the use of tip electrodes to make linear lesions can be significantly more difficult and time consuming. —

Please amend the last complete paragraph of page 9 as follows:

-- Referring to Fig. 3, in one embodiment, the tubular array of metal strands is a wound helical coil 200. The spacing between loops in the coil is varied in order to achieve different physiological effects. The loops can be wound tightly with each loop in the coil in contact with its neighboring loops as in Fig. 3 or the loops can be wound loosely as in Fig. 5. A tight spacing of the loops in the coil will enable the linear electrode 61 to deliver a higher energy density, but may increase the stiffness of the linear electrode and may increase parasitic power loss. Greater spacing between the

loops in the coil will provide more flexibility and less power loss. Referring to Fig. [5] 4 in an alternate embodiment, the tubular array of metal strands is arranged in a braided construction 201.—

Please amend the last complete paragraph of page 10 as follows:

Page 10, last complete paragraph:

--Referring to Figure 8 Figures 1, 2, 8, and 9, articulation of the electrode assembly is utilized in order to better align the linear electrode 54 61 to the generally arcuate shape of the inner chambers of the heart. One means for articulating the electrode assembly is by extending a pull wire 501 from the second mechanism for articulating 55 through the inner catheter 50 and attaching it to the distal tip of the catheter tube 60. Creating a pulling motion on the pull wire 501 by means of the second mechanism for articulating 55 will cause the distal end of the catheter tube 60 to deflect towards the direction of the pulling motion. A stiffener can be used in this configuration in order to return the electrode assembly 54 back to its original position.